Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 1 of 59

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
Northern District of Illinois	V11011	
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Varm fall areas	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
i. Your full name		UNITED TO
Write the name that is on y government-issued picture	^{our} Flower	First name Middlemane Middlemane
identification (for example,	First name	First name
your driver's license or passport).	Lajuana Middle name	SE SECTION OF THE SEC
Bring your picture	Robinson	Midelloname 2 2000 PLLINOIS
identification to your meeting		Last name
with the trustee.		In: Alla
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III) AREADY. CLEAR
		CAPP CONTRACTOR OF THE PROPERTY OF THE PROPERT
All other names you		***
have used in the last 8 years	First name	First name
Include your married or	Middle name	Middle name
maiden names.	Last name	
	Last name	Last name
	First name	First name
		First name
	Middle name	Middle name
	Last name	Last name
Only the last 4 digits of your Social Security	xxx - xx - 5 2 8 0	No.
number or federal	OR OR	xxx - xx
Individual Taxpayer		OR
Identification number (ITIN)	9 xx - xx	9 xx - xx

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 2 of 59

Debtor 1 First Name Middle 1		Case number (if known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in	☐ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
Where you live		If Debtor 2 lives at a different address:
	2KK E 69th Street	Number Street
	3ed Floor	
	City Cm State STP Code	City State ZIP Code
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
Why you are choosing this district to file for	Check one:	ственные том положения выполнения выста выполнения выс
bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 3 of 59

7. The chapter of the Bankruptcy Code you are choosing to file under	Check for Ban	one. (For a okruptcy (Fo	brief description of ea	ach soo Ma						
Bankruptcy Code you are choosing to file	☑ Cha	mapley (1 c	brief description of ea orm 2010)). Also, go to	ach soo Ma						
	🗹 Cha			the top of	tice Required by topage 1 and check	11 U.S.C. § 342(b) for Individuals Filing the appropriate hox				
	☐ Cha		for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7							
		apter 11								
	🔲 Cha	apter 12								
	☐ Cha	apter 13								
s. How you will pay the fee	you sub	rself, you mitting you	may pay with cash,	cashier's	may pay. Typica check, or mone	neck with the clerk's office in your illy, if you are paying the fee y order. If your attorney is y pay with a credit card or check				
	☐ I ne	ed to pay	the fee in installm	nents. If yo	ou choose this o	ption, sign and attach the ents (Official Form 103A).				
	☑ I red By la	quest that aw, a judg	t my fee be waived le may, but is not re	(You may	/ request this op waive your fee	tion only if you are filing for Chapter 7				
	μay	the ree in	installments). If young Fee Waived (Offi	i choose ti	his option, vou n	ur family size and you are unable to nust fill out the Application to Have the with your petition.				
Have you filed for bankruptcy within the	No No									
last 8 years?	☐ Yes.	District		When	MM / DD / YYYY	Case number				
		District		When	MM / DD / YYYY					
				**11011	MM / DD / YYYY	Case number				
		District		When	MM / DD / YYYY	Case number				
. Are any bankruptcy	☑ No		······································		***************************************	999/00/2				
cases pending or being filed by a spouse who is		Debtor				Relationship to you				
not filing this case with you, or by a business partner, or by an affiliate?		District		When		Case number, if known				
umate:		Debtor				Relationship to you				
		District		When	MM / DD / YYYY	Case number, if known				
Do you rent your residence?	☑ No. ☐ Yes.	Go to line 1 Has your la	12. andlord obtained an ev to line 12.	viction judgr	ment against you?					

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 4 of 59

Debtor 1 Flower Laju		Robinson	Case number (# known)				
Part 3: Report About Any	Busine	sses You Own as a	Sole Proprietor				
12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a		o. Go to Part 4. es. Name and location of	business				
business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.							
		City	State ZIP Code				
		Check the appropriate	box to describe your business:				
			ess (as defined in 11 U.S.C. § 101(27A))				
		☐ Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))				
			fined in 11 U.S.C. § 101(53A))				
			(as defined in 11 U.S.C. § 101(6))				
		☐ None of the above					
3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small	Chapter 11 of the Bankruptcy Code and are you a small business debtor? Can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach y most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).						
business debtor, see 11 U.S.C. § 101(51D).	☐ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
	☐ Yes	res, I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.					
Part 4: Report if You Own o	or Have	Any Hazardous Pro	perty or Any Property That Needs Immediate Attention				
I. Do you own or have any							
property that poses or is	Ø No	140					
alleged to pose a threat of imminent and identifiable hazard to public health or safety?	⊔ Yes	. What is the hazard?					
Or do you own any property that needs immediate attention?		If immediate attention	is needed, why is it needed?				
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?							
		Where is the property?	Number Street				
			City State ZIP Code				

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 5 of 59

Debtor 1

Flower Lajuana Robinson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Ц	I am not required to receive a briefing a	bout
	credit counseling because of:	

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 6 of 59

D	ebtor 1 First Name Middle Na							
ŀ	art 6: Answer These Que	estions for Reporting Purpos	ses .					
16	3. What kind of debts do you have?	16a. Are your debts primar as "incurred by an individu	rily consumer debts? Const al primarily for a personal, famil	umer debts are defined in 11 U.S.C. § 101(8	3)			
	, canada	No. Go to line 16b.✓ Yes. Go to line 17.						
		16b. Are your debts primar money for a business or in	rily business debts? Busine. vestment or through the operation	ss debts are debts that you incurred to obtaing of the business or investment.	in			
		☐ No. Go to line 16c.☐ Yes. Go to line 17.						
		16c. State the type of debts you	owe that are not consumer deb	ts or business debts.				
17.	. Are you filing under Chapter 7?	☐ No. I am not filing under Ch	apter 7. Go to line 18.		nantanani			
	Do you estimate that after any exempt property is excluded and administrative expenses	☐ No	er 7. Do you estimate that after a s are paid that funds will be ava	any exempt property is excluded and lable to distribute to unsecured creditors?				
any'e)ta	are paid that funds will be available for distribution to unsecured creditors?	Yes						
8.	How many creditors do you estimate that you owe?	☐ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	☐ 25,001-50,000 ☑ 50,001-100,000 ☐ More than 100,000	APP-Metalobabanjanjangan			
9.	How much do you estimate your assets to be worth?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$50,000,001-\$100 million	n \$10,000,000,001-\$50 billio) I			
	How much do you estimate your liabilities to be?	✓ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 millio \$100,000,001-\$500 millio	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$1,000,000,001-\$10 billion				
F	rt 74 Sign Below		41 00,000,001-4000 mm	on				
O	r you	I have examined this petition, and correct.	d I declare under penalty of perju	ury that the information provided is true and				
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		uns document, i have obtained ar	nd read the notice required by 1		out			
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fires up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and \$711						
		Flower L Robinson Signature of Debtor 1	// ×_					
		-	Si	gnature of Debtor 2				
anglas e		Executed on 07/19/2018 MM / DD / YY	TY Ex	recuted on				

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 7 of 59

Debtor 1 Flower Lajua First Name Middle Nam		Case number (# knowe)			
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.					
by an attorney, you do not need to file this page.	×		, - , - , - , - , - , - , - , - , - , -			
		Date				
	Signature of Attorney for Debtor		MM /	DD /YYYY		
	Printed name					
	Firm name					
	Number Street					
	City	State	ZIP Code			
	Contact phone	Email address				
	Bar number		···			
	ou number	State				

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 8 of 59

Debtor 1	Flower First Name	Lajuana Middle Name	Robin Last N		Cas	se number (if known)_		
For you if you are filing this bankruptcy without an attorney If you are represented by		n	The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.					
an attorney, you do not need to file this page.			To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.					
			You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.					
			If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.					
		ı	Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?					
			□ No					
		1	☑ Yes					
		i	Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?					
			□ No					
			2 Yes					
			oid you pay ☑ No	or agree to pay	someone who is not an at	ttorney to help y	ou fill out your bankruptcy forms?	
		C	Yes. Nar	ne of Person				
			Atta	ich <i>Bankruptcy Pe</i>	tition Preparer's Notice, De	eclaration, and Si	gnature (Official Form 119),	
*		n a	ave read a ttorney ma	nd understood th	is optice, and I am aware be my rights or property if	that filing a han	filing without an attorney. I kruptcy case without an y handle the case.	
		-	Signature of I			Signature of De	btor 2	
		Di	ate	07/19/2018 MM / DD / YYYY		Date	MM / DD / YYYY	
		C	ontact phone	(872) 333-50	30	Contact phone	The state of the s	
		Ce	ell phone			Cell phone	7	
		_						

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In Re:)	
Flower Lajuana Robinson)	
Debtor (s))))	Case No. Chapter

List of Creditors

hecsler Federal Credit Union	BIIDXI MS. 34531
American Credit	PO BOX 204631 Pailas TX 76320
Hope Credit Union	4 Old River Place Suite A barson 45 39202

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 10 of 59

Fill in this information to identify your case:		
Debtor 1 Flower Lajuana Robinson		
Debtor 2		
(Spouse, if tilling) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois		
Case number		
(if known)		k if this is an ided filing
Official Form 106Sum		
Summary of Your Assets and Liabilities and Certain Statistical Info	ormation	12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for information. Fill out all of your schedules first; then complete the information on this form. If you are filing amende your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. Part 1: Summarize Your Assets	r supplying seve	
	Your assets	
Schedule A/B: Property (Official Form 106A/B)	Value of what	you own
1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$	0.00
1c. Copy line 63, Total of all property on Schedule A/B	. \$	0.00
	*	
Part 2: Summarize Your Liabilities		
	Your liabilitie Amount you or	
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 		0.00
	\$	
 Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F 	\$	0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		
	+ \$	0.00
Your total liabilities	\$	0.00
Part 3: Summarize Your Income and Expenses		
I. Schedule I: Your Income (Official Form 106t)		
Copy your combined monthly income from line 12 of Schedule I	\$	
i. Schedule J: Your Expenses (Official Form 106J)		
Copy your monthly expenses from line 22c of Schedule J	\$3,	300.00

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 11 of 59

	ebtor 1	_Flower_	Lajuana	Robinson		ase number (#known)	· · · · · · · · · · · · · · · · · · ·	
		First Name	Middle Name	Last Name	C	ase number (if known)		
	Part 4:	A Th						
	all H	Answer In	ese Questions	for Administrative and Sta	tistical Record	S		
€	. Are yo	ou filing for ba	nkruptcy under C	hapters 7, 11, or 13?				
	☐ No ☑ Ye:	. You have not s	hing to report on th	is part of the form. Check this bo	ox and submit this t	form to the court with	your othe	er schedules,
7	. What k	and of debt do	you have?	anak perlamban dikatikak danak dang milan di ananan dati dipenghabban di sebenah daga sepera danak pida diken dep	Nik disharishi waka waka waka kili maga waka kili waka ya kili waka kili waka waka waka waka waka waka waka wa	tillet anhandra i svilllande sett til samt, med, med, profession gjene, til stepper, ande se til sette ste ste		
	You	ur debts are p nily, or househo	rimarily consume old purpose." 11 U.	r debts. Consumer debts are th S.C. § 101(8). Fill out lines 8-9g	ose "incurred by ar for statistical purpo	n individual primarily f oses. 28 U.S.C. § 159	or a perso	onal,
Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.							nd submit	
8.	From the Form 1.	he Statement 22A-1 Line 11:	of Your Current M	Ionthly Income: Copy your total	current monthly in	come from Official	s, he here e e e emin-hez kenku filogo	eth en the control to
	Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.							\$3,400.00
			ana ang ang ang ang ang ang ang ang ang		erten kilonet kirila kilonet kilonet kilonet ja kilonet kirila kirila kilonet kirila kirila kilonet kirila kir	er kerkinenne en men men men men men men men men	tis e estado en esta	enteret version de trademient de seus de seus de seus de la mande de seus des plans de la misse de la misse de La mande de seus de seus de seus de seus de seus de la mande de la misse de la misse de la misse de la misse d
9.	Copy th	ne following s	pecial categories	of claims from Part 4, line 6 of	Schedule E/F:			
						Total claim		
						i Otal Clailii		
	From	Part 4 on Sch	edule E/F, copy th	ne following:				
	9a. Dom	nestic support o	obligations (Copy li	ne 6a.)		\$	0.00	
	9b. Taxe	es and certain	other debts you ow	e the government. (Copy line 6b	.)	\$	0.00	
	9c. Clair	ms for death or	personal injury wh	ile you were intoxicated. (Copy i	ne 6c.)	\$	0.00	
	9d. Stud	ient loans. (Co	py line 6f.)			\$	0.00	
	9e. Oblig priori	gations arising ity claims. (Cop	out of a separation by line 6g.)	agreement or divorce that you o	id not report as	\$	0.00	
	9f. Debt	ts to pension o	profit-sharing plan	s, and other similar debts. (Copy	line 6h.)	+ \$	0.00	
	9g, Tota l	I. Add lines 9a	through 9f,			\$	0.00	
						L		

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 12 of 59

First Name Middle Name Last Name
Pebtor 2
PEDIOI 2
Spouse, if filing) First Name Last Name Last Name
Inited States Bankruptcy Court for the: Northern District of Illinois

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

.1,	Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured of the amount of any secure Creditors Who Have Clai	ed claims on Schedule D
		☐ Condominium or cooperative☐ Manufactured or mobile home	Current value of the entire property?	Current value of to portion you own?
		Land	\$	\$
	City State ZIP Code	Investment property Timeshare Other	Describe the nature of your owner interest (such as fee simple, tenan the entireties, or a life estate), if kn	
		Who has an interest in the property? Check one	\$,, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	County	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is co	ommunity property
	own or have more than one, list here: Street address, if available, or other description	Other information you wish to add about this is property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
	own or have more than one, list here: Street address, if available, or other description	Other information you wish to add about this is property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured cla	d claims on Schedule D: ns Secured by Property.
		Other information you wish to add about this is property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured cla the amount of any securer Creditors Who Have Clain Current value of the	d claims on Schedule D: ns Secured by Property. Current value of th
		Other information you wish to add about this is property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule D: ms Secured by Property. Current value of th portion you own? \$ of your ownership simple, tenancy by
<u>.</u>	Street address, if available, or other description	Other information you wish to add about this is property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Do not deduct secured clathe amount of any securer Creditors Who Have Clain Current value of the entire property? \$	d claims on Schedule D: ms Secured by Property. Current value of th portion you own? \$ of your ownership simple, tenancy by
2.	Street address, if available, or other description	Other information you wish to add about this is property identification number: What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land investment property Timeshare Other	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule D. ms Secured by Property. Current value of the portion you own? \$ of your ownership simple, tenancy by

Document Robinson Flower Lajuana Debtor 1 Case number (if know First Name Middle Name Last Nam What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ■ Single-family home the amount of any secured claims on Schedule D: 1.3. Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home ☐ Land Investment property City ☐ Timeshare State ZIP Code Describe the nature of your ownership interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2 Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☑ No ☐ Yes Who has an interest in the property? Check one. 3.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? At least one of the debtors and another portion you own? Other information: Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2 Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? At least one of the debtors and another portion you own? Other information: Check if this is community property (see instructions)

Case 18-25618

Doc 1

Filed 09/12/18

Entered 09/12/18 09:40:29

Page 13 of 59

Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29

Case 18-25618 Desc Main Document Page 14 of 59 Flower Lajuana Debtor 1 Case number (if known) First Name Middle Name Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ No ☐ Yes Who has an interest in the property? Check one. Make: 4.1 Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. 4.2. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year Current value of the Current value of the Debtor 1 and Debtor 2 only Other information: entire property? portion you own? At least one of the debtors and another

5.	Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here	\$

☐ Check if this is community property (see

instructions)

Case 18-25618 Doc 1 Filed 09/12/18

Entered 09/12/18 09:40:29 Desc Main Page 15 of 59

Debtor 1

Flower First Name

Lajuana Middle Name

Document Robinson Las! Name

Case number (if known)_

Part 3: Describe Your Personal and Household Items

	o you own or have any legal or equitable interest in any of the following items?	portion y	uct secured claims
6.	Household goods and furnishings		
	Examples: Major appliances, furniture, linens, china, kitchenware No	**************************************	
	Yes. Describe	\$	0.00
7.	Electronics		
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games		
	□ No □ Yes. Describe	etra a report	
	- 100. DOSCING	\$	1,500.00
8.	Collectibles of value		
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles		
	Yes. Describe	\$	
9.	Equipment for sports and hobbies	***********	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments		
	☑ No ☐ Yes. Describe		
	Too. Describe	\$	
10.	Firearms	enero.	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment No		
	☑ No ☐ Yes. Describe	***************************************	
		\$	
11.	Clothes	(h/n + p+ p)	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No		
	☐ Yes. Describe		
		\$	
12.	Jewelry		
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
	Yes. Describe	\$	
	Non-farm animals		:
	Examples: Dogs, cats, birds, horses		
	☑ No ☑ Yes. Describe		
		\$	
4.	any other personal and household items you did not already list, including any health aids you did not list		
ĺ	☑ No		
	→ Yes. Give specific	•	
	information	\$	
5. /	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached or Part 3. Write that number here	\$	1,500.00
•	→		

Case 18-25618

Doc 1

Filed 09/12/18

Entered 09/12/18 09:40:29 Desc Main Page 16 of 59

Debtor 1

Flower First Name

Lajuana Middle Name

Document Robinson Last Name

Case number (if known)_

Describe Your Financial Assets

Do you own or have ar	ny legal or equitable interest in	in any of the following?	-	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Examples:</i> Money yo	u have in your wallet, in your ho	ome, in a safe deposit box, and on hand v	vhen you file your petition	
☑ No				
☐ Yes			Cash:	\$0.00
17. Deposits of money Examples: Checking, and other	savings, or other financial acco similar institutions. If you have r	ounts; certificates of deposit; shares in cre multiple accounts with the same institution	edit unions, brokerage houses, n, list each.	
☑ No ☑ Yes		Institution		
		Institution name:		
	17.1. Checking account:	Lynk Of America	^ - 1.	\$0.00
	17.2. Checking account:	Discover Ban	<u> </u>	s 17'00
	17.3. Savings account:			\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:			\$
	17.6. Other financial account:			Ф
	17.7. Other financial account:			4
	17.8. Other financial account:			3
	17.9. Other financial account:			\$
				T manufacture and a supply pite on the supply pite
	or publicly traded stocks	erage firms, money market accounts		
☑ No	, invostment accounts with bloke	lerage irms, money market accounts		
Q Yes	Institution or issuer name:			
				\$
	Additional to the state of the			\$
			The state of the s	\$
9. Non-publicly traded s an LLC, partnership, a	tock and interests in incorpor	rated and unincorporated businesses,	including an interest in	
☑ No	Name of entity:		% of ownership:	
Yes. Give specific information about	•		0% %	¢
them			0%_%	\$
			0% %	\$
				·

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Page 17 of 59 Document Flower Lajuana Debtor 1 Case number (if known) First Name Middle Name Last Name 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. **Ø** No ☐ Yes. Give specific Issuer name: information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☑ No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No. ☐ Yes..... Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: ____ Prepaid rent: Telephone:

	releptione.		\$	
	Water:		•	
	Rented furniture:		Ψ	
	Other:		\$	
			\$	***************************************
☑ No	a periodic paymer	t of money to you, either for life or for a number of years)		
	···		\$	
			. \$	
			, \$	
Official Form 106A/B		Schedule A/B: Property	pa	ge 6

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 18 of 59 Robinson Page 18 of 59

Flower Lajuana Debtor 1 Case number (if known) First Name Middle Name Last Name 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☐ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ✓ No ☐ Yes. Give specific information about them.... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No. ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses **2** No Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No No ☐ Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years. Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☑ No ☐ Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else **2** No

Yes. Give specific information.....

Debtor 1	Case 18 Flower	-25618 Lajuana Middle Name	l	Filed 09/12/18 Document Robinson	Entered 09/12/18 09:40:29 Page 19 of 59 Case number (if known)		esc Main
Exam	e sts in insura n ples: Health, di		insurance;	health savings account (h	HSA); credit, homeowner's, or renter's insuranc	:e	and the second s
M No)				, and a second of modification		
□ Ye	es. Name the in of each poli	isurance comp by and list its v	pany Co value,	ompany name:	Beneficiary:		Surrender or refund value:
			***************************************				\$
							\$
							\$
If you a	iterest in prop are the benefic ty because sor	iary of a living	trust, expe	m someone who has die ct proceeds from a life ins	d surance policy, or are currently entitled to receiv	/e	
☑ No							
☐ Ye	s. Give specific	information					
						* **************	\$
33. Claims Examp	against third les: Accidents	parties, whe	ther or not	you have filed a lawsuin surance claims, or rights i	or made a demand for payment		
☑ No	, , , , , , , , , , , , , , , , , , , ,	omployment	aisputes, iti				
☐ Yes	s. Describe ead	h claim					
24 Other -			!				\$
10 361	off claims	unliquidate	d claims of	every nature, including	counterclaims of the debtor and rights		
☑ No			r				
☐ Yes	. Describe eac	h claim				******************	
			***************************************			~	3
35. Any fina	ancial assets	vou did not a	Iready list				
☑ No	·						
Yes	. Give specific	information					
			b		MOSTAN AND AND RESIDENCE OF A STATE OF A STA	********	\$
36. Add the	dollar value	of all of your	entries fro	m Part 4, including any	entries for pages you have attached		
ioi rait	4. Write that	number nere	***************************************	***************************************	enances for pages you have attached	->	\$
**			•	٠			
Part 5:	Describe /	Anv Rusin	acc.Bala	tod Dronouty Vo.,	Name 2011		
					Own or Have an Interest In. List ar	ıy re	al estate in Part 1.
37. Do you o	own or have a So to Part 6.	ny legal or ed	quitable int	terest in any business-re	elated property?		
	Go to line 38.						
						p	current value of the ortion you own? ont deduct secured claims
38. Account	s receivable o	r commissi-	ne von -l	andy ones!			r exemptions,
☑ No		- commissio	us you aire	auy earned			
	Describe	e e e e e e e e e e e e e e e e e e e					

Yes. Describe.....

☐ No

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Robinson Page 20 of 59 Flower Lajuana Debtor 1 Case number (if known) First Name Middle Name Last Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☑ No ☐ Yes. Describe..... 41. Inventory No No Yes. Describe... 42. Interests in partnerships or joint ventures M No Yes. Describe Name of entity: % of ownership: % 43. Customer lists, mailing lists, or other compilations M No ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No No ☐ Yes. Describe...... 44. Any business-related property you did not already list **₩** No Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

☐ No

Yes....

Entered 09/12/18 09:40:29 Case 18-25618 Doc 1 Filed 09/12/18 Desc Main Page 21 of 59 Flower Lajuana Debtor 1 Case number (if known) First Name Middle Name 48. Crops-either growing or harvested ☐ No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed ☐ No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list ☐ No Yes. Give specific information..... \$ 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here Part 76 Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☑ No Yes. Give specific information..... 54. Add the dollar value of all of your entries from Part 7. Write that number here List the Totals of Each Part of this Form Part 8:

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 22 of 59

Fill in this i	nformation t	to identify yo	ur case:							
Debtor 1	Flower	Lajuana		Rob	inson					
Debtor 2	First Name		Middle Name		Last Name	-				
(Spouse, if filing			Middle Name		Last Name					
_		ourt for the: No	rthern Distri	ct of Illinois						
Case number (If known)										Check if this is a
				***************************************		. , , , , , , , , , , , , , , , , , , ,	J			amended filing
Official f	Form 10)6C								
Sched	lule C	: The	Prop	erty	You	Claim	as Exc	emp	t	04/16
osnig me prop	erty you liste ed, fill out an	ed on <i>Schedul</i> d attach to this	le A/B: Prop	<i>erty</i> (Official	Form 106.	A/B) as your so	re equally respon ource, list the pro as necessary. (nerty that	vou claim se	rect information. exempt. If more onal pages, write
specific dollar	r amount as	exempt. Alte	ernatively, y	/ou may cla	im the ful	l fair market v	exemption you alue of the prop rights to receive	serty bein	botomayar	ing so is to state a up to the amount
imits the exe	mption to a	e uniimited in particular do	i dollar ame Ilar amoun	ount. Howev t and the va	er, if you	claim an exer	nption of 100% etermined to ex	of fair ma	rket value u	ndor a law that
vould be limit	ied to the ap	plicable stat	utory amou	int.						
Part 1: lo	lentify the	Property Y	ou Claim	as Exemp	t					
You ar	re claiming s	tate and feder	ral nonbank	ruptcy exemp	otions. 11	f your spouse is U.S.C. § 522(t	s filing with you. o)(3)			
☐ You ai	re claiming te	ederal exempt	lions. 11 U.:	S.C. § 522(b) (2)	•				
2. For any p	roperty you	list on Sched	dule A/B th:	at vou claim	as exem	nt fill in the in	formation below	144		
				,	uo exem	pr, mini die n	normation pelo	w.		
Brief des Schedule	cription of the A/B that list	e property an s this propert	id line on Ty	Current valu portion you		Amount of th	ne exemption you	u claim	Specific lav	vs that allow exemption
				Copy the value Schedule A/E	ue from	Check only or	ne box for each ex	xemption.		
Brief description	a·			\$		□ \$				
Line from Schedule						☐ 100% of 1	fair market value cable statutory lii			
Brief				\$		□ \$				
descriptior Line from	1.			Ψ			fair market value	, up to		
Schedule	A/B:	-				any applic	cable statutory lir	mit		
Brief description	n:			\$		Q \$,		
Line from Schedule	A/B:	-					air market value, cable statutory lir			
. Are you cl	aiming a ho	mestead eve	mption of n	nore than ¢1	160 3752					
(Subject to	adjustment o	on 4/01/19 and	d every 3 ye	ars after tha	t for cases	filed on or afte	er the date of adji	ustment.)		
☑ No										
U Yes. Die U No		the property	covered by	the exempti	on within 1	1,215 days befo	ore you filed this	case?		
☐ Ye										

Case 18-25618 Doc 1

Filed 09/12/18 Document

Entered 09/12/18 09:40:29 Desc Main Page 23 of 59

Debtor 1

Flower

Lajuana

Robinson

Case number (# known)

Part 2:

Additional Page

Brief descrip on Schedule	tion of the property and line A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:		\$	_ □\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	_ _ \$	
Line from Schedule A/B:	***************************************		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	 \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description: Line from		\$	\$ 100% of fair market value, up to	
Schedule A/B: Brief	Alphitys and the same and the s		any applicable statutory limit	
description:		\$	□ \$ 100% of fair market value, up to	
Schedule A/B:	***************************************		any applicable statutory limit	
Brief description:		\$	 \$	4 }
Line from Schedule A/B:	***************************************		☐ 100% of fair market value, up to any applicable statutory limit	4.7
Brief description:		\$	□ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description;		\$	- \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B;			☐ 100% of fair market value, up to any applicable statutory limit	With the second
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	- \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 24 of 59

Fill in this information to id	dentify your case:				
Flower	.ajuana	Robinson			
Debtor 1 First Name	Middle Nan				
Debtor 2 (Spouse, if filing) First Name	Middle Nam	Last Name			
United States Bankruptcy Court	for the: Northern Di	strict of Illinois			
Case number					
(If known)				☐ Check	cif this is an
				amend	ded filing
Official Form 106	6D				
***************************************		Who Have Claims Seco	red by Pro	pertv	12/15
		two married people are filing together, both a			
information. If more space	is needed, copy t	he Additional Page, fill it out, number the entr	e equally responsible es, and attach it to thi	for supplying corre s form. On the top o	ct of any
additional pages, write you	ir name and case	number (if known),			*
1. Do any creditors have cla					
No. Check this box and	d submit this form t	o the court with your other schedules. You have r	othing else to report on	this form.	
Yes. Fill in all of the inf	ormation below.				
Pari (F List All Secure	d Claims				
			Column A	Column B	Column C
List all secured claims. If for each claim. If more tha	a creditor has mor	e than one secured claim, list the creditor separa a particular claim, list the other creditors in Part 2	elv	Value of collateral	
As much as possible, list th	ne claims in alphab	etical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1	r	Describe the property that secures the claim:	**************************************		
Creditor's Name		rescribe the property that secures the claim:	<u> </u>	5	\$
N					
Number Street	i	As of the date you file, the claim is: Check all that a			
<u> </u>	_	Contingent	opiy.		
0.00		U nliquidated			
		Disputed			
Who owes the debt? Check o	one.	lature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only		 An agreement you made (such as mortgage or secur car loan) 	ed		
Debtor 1 and Debtor 2 only	Į.	Statutory lien (such as tax lien, mechanic's lien)		•	
At least one of the debtors a	and another	Judgment lien from a lawsuit			
☐ Check if this claim relate	s to a	Other (including a right to offset)	*		
community debt					
Date debt was incurred	Land to the state of the state	ast 4 digits of account number	S. milliobally (India Color Conflict Color Color Ball Sales Color Ball Sal	K. Alifang C. Wallago (A. Gallagoria et al. 1413-1420 de la cita de	Managara (1977 Al lanch vin an ann an a
2.2	D	escribe the property that secures the claim:	\$	\$	\$
Creditor's Name			7777-4- Anu		
Number Street					;
	A	s of the date you file, the claim is: Check all that ap	pły,		!
		Contingent			
City St		Unliquidated			:
Who owes the debt? Check or	_	1 Disputed			
Debtor 1 only		ature of lien. Check all that apply.			:
Debtor 2 only	_	 An agreement you made (such as mortgage or secure car loan) 	d		:
Debtor 1 and Debtor 2 only		Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors ar	nd another	Judgment lien from a lawsuit			. !
Check if this claim relate:	s to a	Other (including a right to offset)	***************************************		
community debt					
Date debt was incurred		ast 4 digits of account number	en e		inglock-polymers/gash-residents/commences-
Add the dollar value of yo	our entries in Col	umn A on this page. Write that number here:	\$,

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main

Document Page 25 of 59 Flower Lajuana Robinson Debtor 1 Case number urki First Name **Additional Page** Column B Column C Part 1: Amount of claim Value of collateral Unsecured After listing any entries on this page, number them beginning with 2.3, followed that supports this Do not deduct the portion by 2.4, and so forth. claim value of collateral. If any Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent City ZIP Code Unliquidated State Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated State Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number

Write that number here:

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main

Document Page 26 of 59

Debtor 1 Flower Lajuana Robinson Case number (if known) Case number (if known)

Part 2:	List Others to Be Not	ified for a Deb	t That You Airead	ly Listed
you have m	ying to collect from you for	radebtyou owe to	o someone else, list t at vou listed in Part 1	r a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. Similarly, if list the additional creditors here. If you do not have additional persons to
				On which line in Part 1 did you enter the creditor?
Name		, , , , , , , , , , , , , , , , , , ,		Last 4 digits of account number
Number	Street			
City	errisk tjel jak 1882 bleve promir i produkt prosiskoj potick de tokkop, protonija njelijak primiski planskih	State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
City		State	ZIP Code	
2019	ententen en treste de formalestanen et apertar e triffette (1,55 km, 45 km, 45 km, 45 km, 45 km, 45 km, 45 km,		ZIP Code	
 Name				On which line in Part 1 did you enter the creditor?
				Last 4 digits of account number
Number	Street			
				<u></u>
City		State	ZIP Code	_
	errolled eine system eine eine eine eine eine eine eine ei		Popular de la Capallia de Calamando e Assenta e no casa de alta de la capacida de la calamando de la capacida d	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
M. M				-
City		State	ZIP Code	
esc-vi-mensevansario appeiga vi per	and a few property of the second of the seco	ik etisentika etimetin etikusja itjanjustioolija 1971 iligi-turasja italiai jalanus.	in Pipingin mat Rii ni Bandharin in in Adigaig Adigain na a Riimin in an ainnium in Agraigean	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street	***************************************		
City	ordinak sempanti 1808 kilong sensa katan silan bahabat 1888 kilong silang san nagasariya di pagi sa silabbura s	State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
City			710	
City		State	ZIP Code	

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Page 27 of 59 Document Fill in this information to identify your case: Flower Laiuana Robinson Debtor 1 First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an (If known) amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply 0.00 Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated

Number Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? Other, Specify ☐ No Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Is the claim subject to offset? Other, Specify ☐ No Yes

2.1

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Flower Lajuana Descination Page 28 of 59 Case number (if known)

Debtor 1

Part 1: Your PRIORITY Unsecured Claims — Continuation Page

Af	ter listing any entries on this page, number ther	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
•	Priority Creditor's Name	Last 4 digits of account number	\$	\$. \$
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
	City State ZiP Code	Contingent Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated Other, Specify			
	Is the claim subject to offset?	Odiel, Specify			
	□ No □ Yes				
		Last 4 digits of account number	\$	***************************************	kirinaren erren erre S
	Priority Creditor's Name			`	*
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
	City State ZtP Code	☐ Contingent ☐ Unliquidated			
		Disputed			
	Who incurred the debt? Check one.				
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
		Claims for death or personal injury while you were intoxicated			
	Check if this claim is for a community debt	Other. Specify			
	Is the claim subject to offset?				
	□ No				:
	Priority Creditor's Name	Last 4 digits of account number	\$	B	\$
		When was the debt incurred?			:
	Number Street	As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code	☐ Contingent ☐ Unliquidated			:
	Who incurred the debt? Check one.	☐ Disputed			1
	Debtor 1 only	Type of PRIORITY unsecured claim:			:
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
	Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated	ii wiji mpi holinoo ka	entirativaj rejultiva entre un un susceptua p	
	•	Other, Specify			
	Is the claim subject to offset?				
	☑ No ☑ Yes				
	The state of the s	The second control of the second seco			

Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Doc 1 Case 18-25618

Debtor 1

Flower Lajuana Decument

Page 29 of 59 Case number (If known)

Middle Name

Last Name

	List All of Your NONPRIORITY Unsecured Claims		
3.	Do any creditors have nonpriority unsecured claims against you ✓ No. You have nothing to report in this part. Submit this form to the Yes		
4.	List all of your nonpriority unsecured claims in the alphabetical anonpriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, I claims fill out the Continuation Page of Part 2.	t hor agan algum lictor identification to a refull to the man	
	_		Total claim
1,1		I not 4 dinte of any of	Total Claim
	Nonpriority Creditor's Name	Last 4 digits of account number	\$
	Number Street	When was the debt incurred?	
		As after the second sec	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	Unliquidated Disputed	
	Debtor 2 only	— Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset? ☐ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other, Specify	
2			\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	_	
		Student loans Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	:
	U No ☐ Yes	Other. Specify	
Ţ			TENNY THOUGHOUSE SHIP CONTROL BOOK SHIP SON TO A STATE OF THE SHIP SHIP SHIP SHIP SHIP SHIP SHIP SHIP
	Nonpriority Creditor's Name	Last 4 digits of account number	nk.
		When was the debt incurred?	-
	Number Street		· · · · · · · · · · · · · · · · · · ·
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	:
		Contingent	
	The Medical Life debt. Office, one.	Unliquidated	:
	Lepior i oniv	☐ Disputed	
	Debtor 1 and Debtor 2 only	_	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	□ No	Debts to pension or profit-sharing plans, and other similar debts	z.
		Other, Specify	i

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Page 30 of 59
Case number (# known)

Debtor 1

Flower Lajuana D**e**6binsent

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بهاة		ш	4

Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning w	rith 4.4, followed by 4.5, and so forth.	Total claim
	Last 4 digits of account number	C
Nonpriority Creditor's Name	When was the debt incurred?	Ф
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	Contingent Unliquidated Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
Yes		
Nonpriority Creditor's Name	Last 4 digits of account number	\$
Number Street	When was the debt incurred?	
reduiber Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disouted	
Debtor 1 only	•	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other, Specify	
□ No □ Yes		
The second control of the control of	Last 4 digits of account number	S
Nonpriority Creditor's Name	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent	
Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only	→ Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
□ No □ Yes	Other. Specify	

Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Case 18-25618 Doc 1

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Lajuana

Decument

Debtor 1

Page 31 of 59 Case number (if known)

Part 3:

List Others to Be Notified About a Debt That You Already Listed

Name	·			On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
***************************************				Last 4 digits of account number
City		State	ZIP Code	
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
				Claims Claims
City	MARKET CONTROL OF THE	State	ZIP Code	Last 4 digits of account number
Name			and the second s	On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
				Claims
City	in en	State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
ranio				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
				Claims
City	Mary transport and the latest the latest transport	State	ZIP Code	Last 4 digits of account number
Name			nnen i menerat gelegelege munnning sessiger i a. a., i.e. i.e.	On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Vumber	Street			Part 2: Creditors with Nonpriority Unsecured
	***************************************			Claims
City	CONTRACTOR OF THE PROPERTY OF	State	ZIP Code	Last 4 digits of account number
Vame				On which entry in Part 1 or Part 2 did you list the original creditor?
varrie				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			Part 2: Creditors with Nonpriority Unsecured
				Claims
ity		State	ZIP Code	Last 4 digits of account number
ame				On which entry in Part 1 or Part 2 did you list the original creditor?
umhar	Clear			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber	Street			Part 2: Creditors with Nonpriority Unsecured
 				Claims
ty		State	ZIP Code	Last 4 digits of account number

Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Case 18-25618 Doc 1 Page 32 of 59

Debtor 1

Flower

Lajuana

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a	. Domestic support obligations	6a.	· \$
from Part 1	6b.	. Taxes and certain other debts you owe the government	6b.	\$
	6c.	Claims for death or personal injury while you were intoxicated	6c,	\$
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$
	6e,	Total. Add lines 6a through 6d.	6e.	\$
				Total claim
Total claims	6f.	Student loans	6f.	
Total claims from Part 2	6g.	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims		Total claim \$
	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority	6f. 6g. 6h.	\$
from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	6g.	\$

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 33 of 59

F	ill in this i	nformation t	o identify your	case:		American de la colonia de la c	
	ebtor	Flower	Lajuana	Rob	oinson		
	ebtor 2	First Name	Mid	die Name	Last Name		
	Spouse If filing)	First Name	Mid	de Name	Last Name		
U	nited States	Bankruptcy Co	ourt for the: Northe	rn District of Illinois	26		
	ase number f known)						
L.'	r Known)	***			····		Check if this is an amended filing
_	56° 4 1 5						amonada ming
		orm 10		adi			
						d Unexpired Leases	12/15
ado	litional paç Do you h	jes, write yo	e is needed, cop our name and ca cutory contract:	by the additional passes number (if knowns se number (if knowns s or unexpired leas	age, fill it out, r wn). ses?	ogether, both are equally responsible for sup number the entries, and attach it to this page.	On the top of any
	☑ No. C	heck this box	and file this forn	n with the court with	your other sche	edules. You have nothing else to report on this for re listed on Schedule A/B: Property (Official Form	m.
2.	List separ	rately each p rent, vehicle	person or comp	any with whom yo	u have the cont	tract or lease. Then state what each contract or in the instruction booklet for more examples of	andanas taka sk
	Person o	company v	vith wham you f	nave the contract c	or lease	State what the contract or lease is fo	or
2.1							
,	Name					<u></u>	
i	Number	Street					
octowers.	City	tananan wasanasa padamay way area wa sa	State	ZIP Code	okuromini terroriyysiisii yakkasia jagakumo.		
2.2	Name						
	Number	Street				ш.	
	-					_	
2.3	City	Sakt Statistic of the experience of the experien	State	ZIP Code	SCIVA-A-SANOARAN AARIN PARAA-ARII AARIAH SAN		
	Name					-	
	Number	Street				-	
	City						
2.4	City	is eagligues provincias en consider securios de la consideración de la consideración de la consideración de la	State	ZIP Code	SSAN MAD MAD ALTO MENDER OF THE STATE OF THE		dert dyfteljen len sentreten fra de til det som til ett sentret sentreten og til ett tillgist fra dette fra de
2.7	Name					_	
	Number	Street				-	
in to end or gings.	City		State	ZIP Code		-	
2.5		e de servicio de la composição de la com		en e	ed a significat de sentico que para en en en el commenço en delimita de sentico de sentico de sentico de sentico	Provided the contract of the c	તમજીતન કરવાની ભાગ તમાર કરવાની તાલુક કરવાના માટે તે તમાર કરવાના માટે અને કરવાના કર્યા છે. આ પણ કરવાના માટે અને તમારે માટે અને અને સાથે તમારે કરવાના માટે અને સાથે માટે માટે અને કરવાના માટે અને કરવાના માટે અને સાથે કરવાના મ
	Name			Wallenberry Committee of the Committee o			
	Number	Street					
	City		State	ZIP Code			

Entered 09/12/18 09:40:29 Case 18-25618 Doc 1 Filed 09/12/18 Desc Main Page 34 of 59 Document Flower Lajuana Robinson Debtor 1 Case number ut know Additional Page if You Have More Contracts or Leases Person or company with whom you have the contract or lease What the contract or lease is for 2.2 Name Number Street City State ZIP Code 2._ Name Number Street City State ZIP Code Name Number Street City State ZIP Code 2,_ Name Number Street City State ZIP Code 2._ Name Number Street City State ZIP Code Name Number Street City State ZIP Code

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 35 of 59

Fill in this information to identify your case:	
Debtor 1 Flower Lajuana Robinson	
First Name Middle Name Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number	
(If known)	☐ Check if this is a
	amended filing
Official Form 106H	
Schedule H: Your Codebtors	12/15
odebtors are people or entities who are also liable for any debts you may have. Be a re filing together, both are equally responsible for supplying correct information. If r nd number the entries in the boxes on the left. Attach the Additional Page to this pagase number (if known). Answer every question.	as complete and accurate as possible. If two married people
 Do you have any codebtors? (If you are filing a joint case, do not list either spouse as No 	s a codebtor.)
Yes	
2. Within the last 8 years, have you lived in a community property state or territory?	? (Community property states and territories include
Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Wash	nington, and Wisconsin.)
No. Go to line 3.	
Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No	
Yes. In which community state or territory did you live?	Fill in the name and current address of that name
	r si ar are name und current address of that person.
Name of your spouse, former spouse, or legal equivalent	
, , , , , , , , , , , , , , , , , , , ,	
Number Street	!
City State ZIP Code	
2.11 0000	•
In Column 1, list all of your codebtors. Do not include your spouse as a codebtor shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule Schedule E/F, or Schedule G to fill out Column 2.	. Make sure you have listed the creditor on
Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
	Check all schedules that apply:
1	O Catanta B r
Name	Schedule D, line
Number Street	Schedule G, line
City State ZIP Code	
2	
Name	Schedule D, line
	☐ Schedule E/F, line
Name Number Street	
Name Number Street City State ZIP Code	☐ Schedule E/F, line
Name Number Street City State ZIP Code	Schedule E/F, line Schedule G, line
Name Number Street City State ZIP Code Name	☐ Schedule E/F, line
Name Number Street City State ZIP Code	Schedule E/F, line Schedule G, line

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 36 of 59

Debtor 1

Flower First Name

Lajuana Middle Name

Robinson Last Name

Case number (if known)

Column	1: Your codebtor			Column O. The state of the stat
00/0////	Tour dodebtor			Column 2: The creditor to whom you owe the debt
-]				Check all schedules that apply:
Name				Schedule D, line
				☐ Schedule E/F, line
Number	Street			☐ Schedule G, line
City		State	ZIP Code	
				D chatter per
Name				Schedule D, line
Number	Street			Schedule G, line
				a solication of the control of the c
City		State	ZIP Code	
None				Schedule D, line
Name				☐ Schedule E/F, line
Number	Street			Schedule G, line
	2,1,350			Goricadie G, inje
City		State	ZIP Code	
Name				— Ochedale D, line
Number	Street			Schedule E/F, line
142110CF	Giret			Schedule G, line
City		State	ZIP Code	
Name				Schedule D, line
Number	Street			Schedule E/F, line
110111002	Oscer			Gorieutie G, Ilie
City		State	ZIP Code	
Name				Schedule D, line
Hallio				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZiP Code	
Name				Schedule D, line
				Schedule E/F, line
Number	Street			Schedule G, line
0.3				_
City		State	ZIP Code	
Name				Schedule D, line
				Schedule E/F, line
Number	Street			Schedule G, line
				·
City		State	ZIP Code	

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 37 of 59

Fill in this information to identify	V VOUE CREAT				
Flourer		, .			
Debtor 1 Flower Lajua	na Ro Middle Name	Dbinson Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:	Northern District of Illinoi	s			
Case number (If known)			Ch	eck if this is:	
				An amended filing	
Official Forms 4001			u	A supplement showing postpincome as of the following da	etition chapter 13 ite:
Official Form 106I				MM / DD / YYYY	
Schedule I: You Be as complete and accurate as p					12/15
supplying correct information. If y If you are separated and your sposeparate sheet to this form. On the Part 1: Describe Employn	e top of any additional p	i. ao not include inti	ひとりのうちょうい うわべいも いっ	uir chauca. If mara annes is us	
Fill in your employment information.		Debtor 1		Debtor 2 or non-fili	ng spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employe	erene er	☐ Employed ☐ Not employed	Mandard Program (1986) (September 1986)
Include part-time, seasonal, or self-employed work.		And	Con	not omployed	
Occupation may include student or homemaker, if it applies.	Occupation	Ustomer	Schuce		
	Employer's name	lightoto	gU		
	Employer's address	Number Street	Fulledon	Number Street	:
		Chicago	Tull VIII	City S	tate ZIP Code
	How long employed the	ere?		-	
Part 2: Give Details About	Monthly Income				
Estimate monthly income as of spouse unless you are separated. If you or your non-filing spouse habelow. If you need more space, at	the date you file this for	er, combine the infor			your non-filing
			For Debto	r 1 For Debtor 2 or non-filing spouse	
List monthly gross wages, sala deductions). If not paid monthly, and the salar deductions are salar deductions.	ry, and commissions (be calculate what the monthly	efore all payroll / wage would be.	2. 3072	4D \$	
3. Estimate and list monthly overt	ime pay.		3. +8314	<u> </u>	
4. Calculate gross income. Add lin	e 2 + line 3.		4. 84/1)	\$	

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 38 of 59

Debtor 1 Flower Lajuana Robinson	~~~	Case number (if know	vn)	
First Name Last Name		,		
		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	\$ 1,000,00	\$	
5. List all payroll deductions:		. 56		
5a. Tax, Medicare, and Social Security deductions	5a.	\$ 589.34	\$	
5b. Mandatory contributions for retirement plans	5b.	\$	\$	
5c. Voluntary contributions for retirement plans	5c.	\$	\$	
5d. Required repayments of retirement fund loans	5d.	\$	\$	
5e. Insurance	5e.	\$	\$	
5f. Domestic support obligations	5f.	\$	\$	
5g. Union dues	5g.	\$	\$	
5h. Other deductions. Specify: 1990 1990	5h.	+ \$ \$ 200	+ \$	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + s	5h. 6,	\$	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	\$	
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a,	\$	\$	
8b. Interest and dividends	8b.	\$	\$	
8c. Family support payments that you, a non-filing spouse, or a depen regularly receive	dent		*	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$	
8d. Unemployment compensation	8d.	\$	\$	
8e. Social Security	8e.	\$	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assist that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	tance I 8f,	\$	\$	
	***	¥	Ψ	
8g. Pension or retirement income	8g.	\$	\$	
8h. Other monthly income. Specify:	8h. +	+ \$	+ \$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	\$	
O. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	************************	\$=	\$
 State all other regular contributions to the expenses that you list in Sch Include contributions from an unmarried partner, members of your household friends or relatives. 	edule J , your dep	pendents, your roomm	nates, and other	
Do not include any amounts already included in lines 2-10 or amounts that ar			s listed in Schedule J.	
Specify:			11, 🛨	\$
 Add the amount in the last column of line 10 to the amount in line 11. Th Write that amount on the Summary of Your Assets and Liabilities and Certain 	e result is Statistica	the combined month Information, if it appl	ly income.	\$Combined
13. Do you expect an increase or decrease within the year after you file this	s form?			monthly income
Yes. Explain:				

Entered 09/12/18 09:40:29 Case 18-25618 Doc 1 Filed 09/12/18 Desc Main Page 39 of 59 Document Fill in this information to identify your case: Debtor 1 Check if this is: Debtor 2 An amended filing (Spouse, if filing) First Name Middle Name A supplement showing postpetition chapter 13 United States Bankruptcy Court for the: District of expenses as of the following date: (State) Case number MM / DD / YYYY Official Form 106J Schedule J: Your Expenses 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Describe Your Household** 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? ☐ No Dependent's relationship to Dependent's Does dependent live Do not list Debtor 1 and Yes. Fill out this information for Debtor 1 or Debtor 2 age with you? Debtor 2. each dependent..... □ No Do not state the dependents' names. ☐ Yes □ No Yes Yes O No Yes ☐ No Yes Do your expenses include ☐ No expenses of people other than ☐ Yes yourself and your dependents? Part 2: **Estimate Your Ongoing Monthly Expenses** Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) Your expenses 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: Real estate taxes 4a. 4b. Property, homeowner's, or renter's insurance 4b. Home maintenance, repair, and upkeep expenses 4c Homeowner's association or condominium dues

4d.

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 40 of 59

Debtor 1 First Name Middle Name Last Name Case number (if known)

			Your expenses
;	5. Additional mortgage payments for your residence, such as home equity loans	5.	\$
•	6. Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ \$
	6d. Other. Specify:	6d.	\$
7	7. Food and housekeeping supplies	7.	
8	3. Childcare and children's education costs		\$
9	2. Clothing, laundry, and dry cleaning	8.	\$
10.		9.	\$
11.	and the second s	10. 11.	\$
12.		12.	\$ \$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.		14.	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	14.	V
	15a. Life insurance		
	15b. Health insurance	15a.	\$
	15c. Vehicle insurance	15b.	\$
	15d. Other insurance. Specify:	15c.	\$
		15d.	\$
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
8.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
9.	·	10.	\$
	Other payments you make to support others who do not live with you. Specify:		
	Other real expects over the bank to the ba	19.	\$
J .	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	re.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 41 of 59

Debto	or 1	First Name Middle Name Last Name Case	e number (if known)	
21. (Other.	Specify:	21.	+\$
22. C	alcula	ate your monthly expenses.		
2	2a. Ad	d lines 4 through 21.	22a.	\$
2	2b. Co	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22 b.	\$
2:	2c. Ad	d line 22a and 22b. The result is your monthly expenses.	22 c.	\$
23. Ca	lculate	e your monthly net income.		
23a	. Co	py line 12 (your combined monthly income) from Schedule I.	23a.	\$
23b	. Co	py your monthly expenses from line 22c above.	23b.	-\$
230	. Su	btract your monthly expenses from your monthly income.		
	Th	e result is your monthly net income.	23c.	\$
For	exam	xpect an increase or decrease in your expenses within the year after you file this ple, do you expect to finish paying for your car loan within the year or do you expect yo payment to increase or decrease because of a modification to the terms of your mortg.	HIF	
	No.			
	Yes.	Explain here:		
			· · · · · · · · · · · · · · · · · · ·	

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 42 of 59

Fill in this information to identify Debtor 1 Flower Lajuar First Name Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: Case number (If known) Official Form 106J-2	Middle Name Last Name Middle Name Last Name Northern District of Illinois	expense	nded filing ement showing postr es as of the following	date:
Use this form for Debtor 2's separa Debtor 2 have one or more depend only with respect to expenses for	Expenses for Sepa ate household expenses ONLY IF D dents in common, list the dependen Debtor 2 that are not reported on So is form. On the top of any additional	ebtor 1 and Debtor 2 maintain se ts on both Schedule J and this fo chedule J. Be as complete and a	parate households. I	f Debtor 1 and stions on this form
 Do you and Debtor 1 maintain set No. Do not complete this for Yes 				
2. Do you have dependents? Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J. Do not state the dependents' names.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 2: Son Son	Dependent's age 18 14 8 8	Does dependent live with you? No Yes No Yes No Yes No Yes
Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?	☑ No ☐ Yes			Yes
Estimate Your Ongoir Estimate your expenses as of your lexpenses as of a date after the bank Include expenses paid for with non- such assistance and have included 4. The rental or home ownership ex any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or ren 4c. Home maintenance, repair, an 4d. Homeowner's association or compared to the second to th	bankruptcy filing date unless you as cruptcy is filed. cash government assistance if you it on Schedule I: Your Income (Office cpenses for your residence, Include inter's insurance	know the value of cial Form 106L)	Your expens 4. \$4a. \$	

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 43 of 59

Case number (if known)_

Robinson

Last Name

Your expenses 3,300.00 5. Additional mortgage payments for your residence, such as home equity loans 6. Utilities: Electricity, heat, natural gas 6a. 6a Water, sewer, garbage collection 6b. Telephone, cell phone, Internet, satellite, and cable services 6c. Other, Specify: _ 6d Food and housekeeping supplies 7. Childcare and children's education costs 3.400.00 8. Clothing, laundry, and dry cleaning 9. 9. Personal care products and services 10. Medical and dental expenses 11. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. Entertainment, clubs, recreation, newspapers, magazines, and books 13. Charitable contributions and religious donations 14 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b 15c. Vehicle insurance 15c. 15d. Other insurance, Specify:__ 15d. 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a 17b. Car payments for Vehicle 2 17c. Other, Specify:_ 17d. Other, Specify: Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18 Other payments you make to support others who do not live with you. Specify:_ 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. 20b. Real estate taxes 20b. 20c. Property, homeowner's, or renter's insurance 20c. 20d. Maintenance, repair, and upkeep expenses 20d 20e. Homeowner's association or condominium dues 20e.

Flower

First Name

Lajuana

Middle Name

Debtor 1

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 44 of 59

Debtor 1	Flower First Name	Lajuana Middle Name	Robinson Last Name	Case number (if known	1)	
21. Othe	r. Specify;			-	21. + \$	
The r	esult is the mor	nses. Add lines 5 th hthly expenses of De ebtor 1 and Debtor 2	ebtor 2. Copy the result to line 22h o	f Schedule J to calculate the	22. \$4013	-
23. Line no	ot used on this	form.				
24. Do yo u	ı expect an inc	crease or decrease	in your expenses within the year	after you file this form?		
			ng for your car loan within the year or e because of a modification to the te			
☐ No.	· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '					
Yes	Explain h	ere:	A commence of the commence of		4666a a a mag 1999,000 (1996, 1986, 1986, 1986, 1986, 1986, 1986, 1986, 1986, 1986, 1986, 1986, 1986, 1986, 19	~~~ ~ : :
		Commence of the Commence of th				-

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 45 of 59

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II in this inform			ase:					1.5544.	TETOTOLINE LIKELERAN PARAMETER PROPERTY				***************************************
btor 1 Flov		ajuana Mid	lle Name	Robinson Last Name	· · · · · · · · · · · · · · · · · · ·								
btor 2 ouse, if filing) First N	lamê	Mid	lle Name	Last Name		_							
ited States Bankri													
se number													
known)													eck if this ended fil
Official Fo	rm 10	6Doc											
			-A 1					_					
Jeciara	ation	ADOU	it an i	Individ	ual D	ebt	or's	3 Sc	he	dul	es		12
two married p	eople are f	iling togethe	r, both are e	qually responsi	ble for sup	plying	correct	informa	tion.				
ears, or both. 1	y or proper	τy by traud i	n connection	cy schedules or n with a bankru 71.	r amended ptcy case o	schedu can resi	iles. Mai ult in fin	king a fa es up to	eta ezir	tement 100, or i	, conce	ealing pr enment f	operty, or for up to 2
Sign Did you pay	y or proper 8 U.S.C. §§	pay someo	n connection	n with a bankru _l	ptcy case o	can resi	ult in fin	es up to	alse sta 0 \$250,0	tement 100, or i	, conce	ealing pr	operty, or
Sign	y or proper 8 U.S.C. §§	pay someo	n connection	n with a bankru	o help you	fill out	ult in fin	es up to	nise sta) \$250,0 ms?	100, or i	mprisc	enment 1	or up to 2
Sign Did you pay	y or proper 8 U.S.C. §§	pay someo	n connection	n with a bankru	o help you	fill out	ult in fin	es up to	nise sta) \$250,0 ns?	100, or i	mprisc	enment 1	or up to 2
Sign Did you pay	y or proper 8 U.S.C. §§	pay someo	n connection	n with a bankru	o help you	fill out	bankrupto	es up to	nise sta) \$250,0 ns?	100, or i	mprisc	enment 1	or up to 2
Did you pay o	n Below or agree to	pay someo	n connection 1519, and 35 ne who is NO	n with a bankru 71. OT an attorney to	o help you	fill out . Attach i	bankrup Bankrupto Bankrupto re (Officia	otcy form y Petition I Form 11	ms? Prepare	100, or i	mprisc	enment 1	or up to 2
Did you pay of No Yes. Nam	n Below or agree to	pay someo	n connection 1519, and 35 ne who is NO	n with a bankru	o help you	fill out . Attach i	bankrup Bankrupto Bankrupto re (Officia	otcy form y Petition I Form 11	ms? Prepare	100, or i	mprisc	enment 1	or up to 2
Did you pay of No Yes. Nam	n Below or agree to ne of person_ y of berjury	pay someo	n connection 1519, and 35 ne who is NO	n with a bankru 71. OT an attorney to	o help you	fill out . Attach i	bankrup Bankrupto Bankrupto re (Officia	otcy form y Petition I Form 11	ms? Prepare	100, or i	mprisc	enment 1	or up to 2
Sign Did you pay of No Yes. Nam	n Below or agree to ne of person_ y of berjury	pay someo	n connection 1519, and 35 ne who is NO	Tan attorney to	o help you	fill out . Attach i Signatu	bankrup Bankrupto Bankrupto re (Officia	otcy form y Petition I Form 11	ms? Prepare	100, or i	mprisc	enment 1	or up to 2

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 46 of 59

Debtor 1	Flower	Lajuana	Robinson		
2 - 1-1 2	First Name	Middle Name	Last Name		
Debtor 2 Spouse, if fil	ling) First Name	Middle Name	Las! Name		
Inited State	es Bankruptcy C	ourt for the: Northern District	of Illinois		
ase numb If known)	er	***************************************			
·					Check if this is a amended filing
)fficial	Form 10	07			
tater	nent of	Financial Affa	irs for Indiv	iduals Filing for Ba	nkruntov
				g together, both are equally respons	
OHIDAGION	i. II more spai	ce is needed, attach a sep er every question.	arate sheet to this fo	g together, both are equally respons rm. On the top of any additional page	ible for supplying correct es, write your name and case
mber (ii r	Mown). Answ	er every question.			
Part 1:	Give Detail	s About Your Marital S	tatus and Where Y	ou Lived Before	
	,	marital status?			
☐ Mar	ried married				
□= 1001	married				
During	the last 3 year	s, have you lived anywher	re other than where v	ou live now?	
During to	the last 3 year	s, have you lived anywhei	re other than where y	ou live now?	
□ No		rs, have you lived anywher			
☐ No ☐ Yes			3 years. Do not include Dates Debtor 1		Dates Debtor 2
☐ No ☐ Yes	. List all of the		3 years. Do not include	where you live now.	Dates Debtor 2 lived there
☐ No ☐ Yes	. List all of the		3 years. Do not include Dates Debtor 1	where you live now.	lived there
☐ No ☐ Yes	. List all of the		3 years. Do not include Dates Debtor 1	e where you live now. Debtor 2:	lived there Same as Debtor
☐ No ☐ Yes	. List all of the		3 years. Do not include Dates Debtor 1	e where you live now. Debtor 2:	lived there Same as Debtor From
☐ No ☐ Yes	. List all of the		Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1	lived there Same as Debtor
☐ No ☐ Yes	. List all of the	Places you lived in the last of APTESYON AVE	Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1 Number Street	fived there Same as Debtor From To
☐ No ☐ Yes	. List all of the		Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1 Number Street City State 2	lived there Same as Debtor From
☐ No ☐ Yes	. List all of the	Places you lived in the last of APTESYON AVE	Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1 Number Street City State 2	Iived there Same as Debtor From To Prode
No Yes	List all of the ebtor 1: 12/5 Chicago	APPESION AVE	Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1 Number Street City State 2	From To Same as Debtor 1
No Yes	. List all of the	APPESION AVE	Dates Debtor 1 lived there From 76	Debtor 2: Same as Debtor 1 Number Street City State 2	FromToToToToToToToToToTo
No Yes	List all of the ebtor 1: 12/5 Chicago	APPESION AVE	Dates Debtor 1 lived there From 76	Debtor 2: Same as Debtor 1 Number Street City State 2	From Same as Debtor 1 From To Same as Debtor 1
De No	List all of the ebtor 1: List all of the ebtor 1:	APTESION AVE	Dates Debtor 1 lived there From 76	Debtor 2: Same as Debtor 1 Number Street City State 2 Number Street	From Same as Debtor 1 From To Same as Debtor 1 From To To To
De No	List all of the ebtor 1: List all of the ebtor 1:	APPESION AVE	Dates Debtor 1 lived there From 76	Debtor 2: Same as Debtor 1 Number Street City State 2	From Same as Debtor 1 From To Same as Debtor 1
No De No De No Cit	List all of the ebtor 1: List all of the ebtor 1:	APPESION AVE	Dates Debtor 1 lived there From 75 To 87777	Debtor 2: Same as Debtor 1 Number Street City State 2 Same as Debtor 1 Number Street	From To
No De	List all of the ebtor 1: List all of the ebtor 1:	APPESION AVE	Dates Debtor 1 lived there From 75 To 87777	Debtor 2: Same as Debtor 1 Number Street City State 2 Number Street	ilived there Same as Debtor From To Same as Debtor 1 From To ZIP Code
No De No	List all of the abtor 1: List all of the abtor 1:	APPESION AVE	Prom To From To Spouse or legal equivaho, Louisiana, Nevado	Debtor 2: Same as Debtor 1 Number Street City State 2 Same as Debtor 1 Number Street City State 2 And	ilived there Same as Debtor From To Same as Debtor 1 From To ZIP Code

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 47 of 59

Debtor 1	Flower	Lajuana	Robinson	Cacan	umber (if known)	
	First Name	Middle Name La	st Name	Case II	unider (if known)	
L. (1)	in the total amor	unt of income you receive int case and you have inc	ent or from operating a bed from all jobs and all bustome that you receive toge	inesses, including part-t	or the two previous calcime activities. Jer Debtor 1.	endar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		1 of current year until led for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	37,963.52	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$
	For last calend	dar year:	Wages, commissions,	So encion	☐ Wages, commissions,	
	(January 1 to D	_	bonuses, tips Operating a business	\$OC 510	bonuses, tips Operating a business	\$
	For the calend	ar year before that:	☐ Wages, commissions,		☐ Wages, commissions,	
		ecember 31,	bonuses, tips Operating a business	\$	bonuses, tips Operating a business	\$
inclu uner	you receive any ide income rega nployment, and	rdless of whether that incother public benefit payn	his year or the two previous the standard of the two previous taxable. Examples the the thick th	of other income are alim ome; interest; dividends:	nony; child support; Social s money collected from laws	uits: rovalties: and
Incluuner gam List	you receive any ude income rega mployment, and bling and lottery each source and	y other income during to rdiess of whether that income other public benefit paym winnings. If you are filing the gross income from e	his year or the two previous the standard of the two previous taxable. Examples the the thick th	of other income are alimome; interest; dividends; income that you receive	money collected from laws ed together, list it only once	uits: rovalties: and
Incluuner gam List	you receive any ude income rega nployment, and bling and lottery each source and	y other income during to rdiess of whether that income other public benefit paym winnings. If you are filing the gross income from e	his year or the two previous come is taxable. Examples nents; pensions; rental inco g a joint case and you have	of other income are alimome; interest; dividends; income that you receive	money collected from laws ed together, list it only once	uits: rovalties: and
Incluuner gam List	you receive any ude income rega mployment, and bling and lottery each source and	y other income during to rdiess of whether that income other public benefit paym winnings. If you are filing the gross income from e	his year or the two previous is taxable. Examples nents; pensions; rental incorp a joint case and you have each source separately. Do	of other income are alimome; interest; dividends; income that you receive	money collected from laws ed together, list it only once it you listed in line 4.	uits: rovalties: and
Incluurer gam	you receive any ude income rega mployment, and bling and lottery each source and No Yes. Fill in the de	y other income during to rdiess of whether that income other public benefit paym winnings. If you are filing the gross income from e	his year or the two previous is taxable. Examples nents; pensions; rental incog a joint case and you have each source separately. Do Debtor 1	of other income are alimene; interest; dividends; income that you receive o not include income that Gross income from each source (before deductions and	money collected from laws ed together, list it only once it you listed in line 4. Debtor 2 Sources of income	cuits; royalties; and e under Debtor 1. Gross income from each source (before deductions and
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Incluurer gam	you receive any ude income rega mployment, and bling and lottery each source and No Yes. Fill in the de	y other income during to rdiess of whether that income public benefit payments. If you are filing the gross income from eatails. 1 of current year untilled for bankruptcy:	his year or the two previous is taxable. Examples nents; pensions; rental incog a joint case and you have each source separately. Do Debtor 1	of other income are alimene; interest; dividends; income that you receive o not include income that Gross income from each source (before deductions and	money collected from laws ed together, list it only once it you listed in line 4. Debtor 2 Sources of income	cuits; royalties; and e under Debtor 1. Gross income from each source (before deductions and
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Incluurer gam	you receive any de income rega mployment, and bling and lottery each source and to source and so fee. Fill in the defendance from January the date you fill for last calend	y other income during to rdiess of whether that income public benefit paymetrings. If you are filing to the gross income from eatilis. 1 of current year untilled for bankruptcy:	his year or the two previous is taxable. Examples nents; pensions; rental incog a joint case and you have each source separately. Do Debtor 1	of other income are alime; interest; dividends; income that you receive to not include income that Gross income from each source (before deductions and exclusions) 32,43,52 5	money collected from laws ed together, list it only once it you listed in line 4. Debtor 2 Sources of income	cuits; royalties; and e under Debtor 1. Gross income from each source (before deductions and
Incluurer gam	you receive any ide income regal mployment, and bling and lottery each source and No fee. Fill in the defendance of the date you fill for last calend (January 1 to Defended in the defended of the date of the da	other income during to roless of whether that income public benefit paym winnings. If you are filing if the gross income from eatails. 1 of current year until led for bankruptcy: ar year: ecember 31,	his year or the two previous is taxable. Examples nents; pensions; rental incog a joint case and you have each source separately. Do Debtor 1	of other income are alime; interest; dividends; income that you receive to not include income that Gross income from each source (before deductions and exclusions) 32,43,52 5	money collected from laws ed together, list it only once it you listed in line 4. Debtor 2 Sources of income	cuits; royalties; and e under Debtor 1. Gross income from each source (before deductions and

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 48 of 59

ebtor 1	First Name	Lajuana Middle Name	Ro Last Name	binson	_ Cas	se number (if known)	
Part 3:	List Cert:	ain Payments Yo	u Mada Rafa	ro Vou Eilea	i fan Banton (
	#10t G C/1	am s ayments 10	u made belo	re rou rileo	for Bankruptcy		
6. Are eit	her Debtor 1	l's or Debtor 2's de	ebts primarily c	onsumer deb	ts?		
☐ No	. Neither De	ebtor 1 nor Debtor by an individual prima	2 has primarily arily for a persor	consumer de	ebts. Consumer debts nousehold purpose."	are defined in 11 U.S.C.	§ 101(8) as
					ay any creditor a total	of \$6,425* or more?	
	☐ No. Go						
	iU	tai amount you paid	that creditor. Do) not include p	avments for domestic.	e or more payments and s support obligations, such ir this bankruptcy case.	the as
	* Subject to	o adjustment on 4/0	1/19 and every 3	years after th	at for cases filed on or	after the date of adjustment	ent.
☑ Yes		r Debtor 2 or both				•	
					ay any creditor a total (of \$600 or more?	
	No. Go						
	CI	euttor. Do not includ	e payments for c	iomestic supp	\$600 or more and the ort obligations, such a y for this bankruptcy o	total amount you paid tha s child support and ase.	t
	K,	100las [J 1	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor	CSICK TU	relat		\$ J/00	s 12, 191	— ☐ Mortgage
	210	D7 Pass 1	DY.		,	Q	□ ear
	Number	Street					Credit card
	ক্র	1 1/0	2040				Loan repayment
	151	IDX MS	34531				Suppliers or vendors
	City	State	ZIP Code				Other
					\$	\$	Mortgage
	Creditor's	s Name					Car
	Number	Street	***************************************				☐ Credit card
							Loan repayment
							Suppliers or vendors
	City	State	ZIP Code				Other
	Caralliana	No.	**************************************		\$	\$	
	Creditor's	name					Car
	Number	Street	······································				Credit card
							Loan repayment
							Suppliers or vendors
	City	State	ZIP Code				Other
							

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 49 of 59

tor 1	Flower First Name	Lajuana Middle Name	R Last Name	obinson		Case number (if know,	n)
corpo agen	ers include yo orations of whi at, including on	ur relatives; any ge ich you are an offic	eneral partners; i er, director, pers	relatives of any son in control.	y general partners; or owner of 20% or	partnerships of whi	who was an insider? ch you are a general partner; g securities; and any managing or domestic support obligations,
g N	ło						
Ū Y	es. List all pay	ments to an inside	r.	Dates of	Total amount	Amount you still	Reason for this payment
				payment	paid	owe	
	Insider's Name				\$	\$	
i	Number Street						
Ċ	City	State	ZIP Code				
Ī	nsider's Name				\$	\$	
ī	Number Street	***************************************					
č	City	State	ZIP Code				
nclude	e payments or	e you filed for bar n debts guaranteed ments that benefite	or cosigned by		Total amount		n account of a debt that benefited Reason for this payment Include creditor's name
İn	ısider's Name				\$	\$	
Ñi	umber Street						
 Ci	ftv	State	ZIP Code				
,		State	ZIP Code				
Ins	sider's Name				\$	\$	
Nu	umber Street					:	
Cit	ty	State	ZIP Code				

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 50 of 59

in 1 year before you filed for bankrupt all such matters, including personal injur-	tcy, were you a party in any cases, small claims actions	lawsuit, court action, or adm	inistrative proc	eeding?
contract disputes.	y care of critical order to action to	divorces, collection suits, pater	rriny actions, sup	port or custody modifi
No				
es. Fill in the details.				
	Nature of the case	Court or agency		Status of the ca
Case title		Court Name		Pending
				On appeal
		Number Street		Concluded
Case number	:			
		City Stat	te ZIP Code	
Case title		Court Name		rending
				On appeal
		Number Street		☐ Concluded
Case number		City State		
n 1 year before you filed for bankrupto				
o. Go to line 11,	cy, was any or your property v.	/ repossessed, foreclosed, ga	ırnished, attach	ed, seized, or levied
call that apply and fill in the details below	v. Describe the prope	rtv	irnished, attach	
o. Go to line 11,	v. Describe the prope			
o. Go to line 11,	v. Describe the prope	rtv		
Call that apply and fill in the details below c. Go to line 11. es. Fill in the information below.	Describe the prope	rty	Date	Value of the proper
o. Go to line 11.	Describe the prope Explain what happe	nty	Date	Value of the proper
Call that apply and fill in the details below c. Go to line 11. es. Fill in the information below.	Describe the prope Explain what happe	nty med repossessed.	Date	Value of the proper
Call that apply and fill in the details below c. Go to line 11. es. Fill in the information below.	Explain what happe Property was Property was	ned repossessed. foreclosed.	Date	Value of the proper
Call that apply and fill in the details below D. Go to line 11. es. Fill in the information below. Creditor's Name Number Street	Explain what happe Property was Property was Property was	nty ned repossessed. foreclosed. garnished.	Date	Value of the proper
Call that apply and fill in the details below to. Go to line 11. es. Fill in the information below. Creditor's Name Number Street	Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.	Date	Value of the proper
Call that apply and fill in the details below D. Go to line 11. es. Fill in the information below. Creditor's Name Number Street	Explain what happe Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.	Date	Value of the proper
Call that apply and fill in the details below D. Go to line 11. es. Fill in the information below. Creditor's Name Number Street	Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.	Date	Value of the proper
Call that apply and fill in the details below D. Go to line 11. es. Fill in the information below. Creditor's Name Number Street	Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.	Date	Value of the proper
Creditor's Name Creditor's Name Creditor's Name Creditor's Name	Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied.	Date	Value of the proper
Creditor's Name Number Street City State ZIP Cod	Explain what happe Property was Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied. ty	Date	Value of the proper
Creditor's Name Creditor's Name Creditor's Name Creditor's Name	Explain what happe Property was Property was Property was Property was Property was Describe the proper	ned repossessed. foreclosed. garnished. attached, seized, or levied. ty	Date	Value of the proper
Creditor's Name Creditor's Name Creditor's Name Creditor's Name	Explain what happe Property was Property was Property was Property was Property was Explain what happer	ned repossessed. foreclosed. garnished. attached, seized, or levied. tty	Date	Value of the proper
Creditor's Name	Explain what happe Property was Property was Property was Property was Explain what happer Explain what happer Property was r	ned repossessed. foreclosed. garnished. attached, seized, or levied. ty ned repossessed. oreclosed.	Date	Value of the proper
Creditor's Name Creditor's Name Creditor's Name Creditor's Name	Explain what happe Property was of	ned repossessed. foreclosed. garnished. attached, seized, or levied. ty ned repossessed. oreclosed.	Date	Value of the proper

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 51 of 59

1	Flower	Lajuana	Robinson	Case number (if known)		
	First Name	Middle Name	Last Name	Gase Hulliber (#known)		
Nithir	n 90 davs hef	ore you filed for b	ankrunten did ann prodites is also	ation at the second		
iccou	unts or refuse	to make a payme	ankruptcy, did any creditor, includent because you owed a debt?	aing a bank or financial institu	tion, set off any a	amounts from your
⊒ No			•			
☐ Ye	es. Fill in the d	etails.				
			Describe the action the cred	itor took	Date action was taken	Amount
Cre	editor's Name				was taken	
			:			
Nun	mber Street		Wildeland of the Control of the Cont			\$

			<u>i</u>	The state of the s		
City	!	State ZIP C	ode Last 4 digits of account num	nber: XXXX		
			Edot 4 digita of account fluir	ibel. AAAA		
Vithin	1 vear before	e vou filed for han	kruptcy, was any of your property	ein the manner of the contract of		
redito	ors, a court-a	ppointed receiver.	, a custodian, or another official?	in the possession of an assig	nee for the benet	fit of
] No		.,	a traction and another official:			
Yes						
	J					
5:	List Certai	n Gifts and Con	tributions			
No		e you filed for ban	nkruptcy, did you give any gifts wi	th a total value of more than \$1	600 per person?	
J No J Yes Gif	s. Fill in the de		600 Describe the gifts		600 per person? Dates you gave the gifts	Value
J No J Yes Gif	s. Fill in the de	tails for each gift,	600 Describe the gifts	th a total value of more than \$6	Dates you gave	Value
J No J Yes Gif per	s. Fill in the de fts with a total r person	tails for each gift.	600 Describe the gifts		Dates you gave	
J No J Yes Gif per	s. Fill in the de	tails for each gift.	600 Describe the gifts		Dates you gave	Value \$
J No J Yes Gif per	s. Fill in the de fts with a total r person	tails for each gift.	600 Describe the gifts		Dates you gave	
J No J Yes Gif per	s. Fill in the de fts with a total r person	tails for each gift.	600 Describe the gifts		Dates you gave	
Yes Giff per	s. Fill in the de fts with a total r person	tails for each gift.	600 Describe the gifts		Dates you gave	
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Yes Giff per	s. Fill in the de fts with a total ir person on to Whom You G	tails for each gift.	600 Describe the gifts		Dates you gave	
No Yes Giff per Person	s. Fill in the de fts with a total or person	tails for each gift. value of more than \$1 Save the Gift State ZIP Coo	600 Describe the gifts		Dates you gave	
No Yes Giff per Person	s. Fill in the de fts with a total ir person on to Whom You G	tails for each gift. value of more than \$1 Save the Gift State ZIP Coo	600 Describe the gifts		Dates you gave	
No Yes Giff per Person	s. Fill in the de fts with a total r person on to Whom You G	tails for each gift. value of more than \$ Save the Gift State ZIP Coo	600 Describe the gifts		Dates you gave	
No Yes Giffs Person	s. Fill in the de fts with a total r person on to Whom You G	tails for each gift. value of more than \$1 Save the Gift State ZIP Coo	600 Describe the gifts Describe the gifts		Dates you gave the gifts	
No Yes Giffs Person	s. Fill in the de fts with a total r person on to Whom You G	tails for each gift. value of more than \$ Save the Gift State ZIP Coo	600 Describe the gifts Describe the gifts		Dates you gave the gifts	\$ \$
No Yes Giff per Person	s. Fill in the de fts with a total or person on to Whom You G ber Street on's relationship s with a total valuerson	tails for each gift. value of more than \$60 State ZIP Coo	600 Describe the gifts Describe the gifts		Dates you gave the gifts	\$ \$
No Yes Giff per Person	s. Fill in the de fts with a total r person on to Whom You G	tails for each gift. value of more than \$60 State ZIP Coo	600 Describe the gifts Describe the gifts		Dates you gave the gifts	\$ \$
No Yes Giff per Person	s. Fill in the de fts with a total or person on to Whom You G ber Street on's relationship s with a total valuerson	tails for each gift. value of more than \$60 State ZIP Coo	600 Describe the gifts Describe the gifts		Dates you gave the gifts	\$ \$
No Yes Giff per Person	s. Fill in the de fts with a total or person on to Whom You G ber Street on's relationship s with a total valuerson	tails for each gift. value of more than \$60 State ZIP Coo	600 Describe the gifts Describe the gifts		Dates you gave the gifts	\$ \$
No Yes Giff per Person	s. Fill in the de fts with a total or person on to Whom You G ber Street on's relationship s with a total valuerson	tails for each gift. value of more than \$60 State ZIP Coo	600 Describe the gifts Describe the gifts		Dates you gave the gifts	\$ \$
No Yes Giff per Person	s. Fill in the de fts with a total or person on to Whom You G ber Street on's relationship s with a total valuerson	tails for each gift. value of more than \$60 State ZIP Coo	600 Describe the gifts Describe the gifts		Dates you gave the gifts	\$ \$
No Yes Giff per Person	s. Fill in the de fts with a total or person on to Whom You G ber Street on's relationship s with a total valuerson	tails for each gift. value of more than \$60 State ZIP Coo	600 Describe the gifts Describe the gifts		Dates you gave the gifts	\$ \$
No Yes Giff per Person	s. Fill in the de fts with a total or person on to Whom You G ber Street on's relationship s with a total valuerson	tails for each gift. value of more than \$ bave the Gift State ZIP Cor to you Jue of more than \$60 ave the Gift	Describe the gifts Describe the gifts		Dates you gave the gifts	\$ \$
No Yes Gift Person City Person Number City City City City	s. Fill in the de fts with a total r person on to Whom You G ber Street on's relationship s with a total valuerson in to Whom You G er Street	tails for each gift. value of more than \$60 State ZIP Coo	Describe the gifts Describe the gifts		Dates you gave the gifts	\$ \$

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 52 of 59

otor 1	Flower	Lajuana Middle Name	Robinson ast Name	Case number (# known)_		
		MIDDLE MAINE	asi name			
ı With	in 2 vears hef	are you filed for hante	untour did you at a annual			
	Vo	ore you med for parist	uptcy, did you give any gifts or c	ontributions with a total valu	ue of more than \$	600 to any charity?
		details for each gift or co	ontribution.			
	Gifts or contrib	outions to charities	Describe what you contributed		D=4=	
	that total more	than \$600	•		Date you contributed	Value
7	harity's Name				·	\$
					1	Δ.
						Φ
Ñ	umber Street					
ō	ity State	ZIP Code				
t 6:	List Cert	ain Losses				
			otcy or since you filed for bankru			
□ N	i ter, or gambli o es. Fill in the di	-				
 	now the loss occ	operty you lost and curred	Describe any insurance coverage		Date of your loss	Value of property lost
			Include the amount that insurance he claims on line 33 of Schedule A/B:	Property.		
						\$
				:		Ψ
		in Payments or Tran				
ou c	unsuneu abut	at seeking bankruptçy i	tcy, did you or anyone else acting or preparing a bankruptcy petitio	n?		to anyone
ıclud	e any attorneys	s, bankruptcy petition pre	eparers, or credit counseling agenc	ies for services required in you	ur bankruptcy.	
] No	s. Fill in the de	stalla				
- 10	s. i m m uie de	stails.				
<u> </u>	erson Who Was Pa	id.	Description and value of any prop		Date payment or transfer was	Amount of paymen
'	DISON WINC Was Fa	nu .	- Marin and a second of the se		made	
N	umber Street					\$

-						\$
C	ry .	State ZIP Code		:		
Ēr	nail or website addr	ess		:		
Pe	rson Who Made the	e Payment, if Not You				
		,, 1 Ou				

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 53 of 59

		juana	Robinson	r	ase number (#known)		
	First Name Mid	Jdie Name Last	Name		ase number (# known)		
			Description and value	of any property transi	erred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid				**************************************		,,
	All made and Colonial					***************************************	\$
	Number Street						¢
						**************************************	4)
	City	State ZIP Code				•	
	Email or website address		-				
	Person Who Made the Payr	ment, if Not You		,			
			cy/ did you or anyone e	/			
- N	ot include any payme lo es. Fill in the details.	/	Description and value o	f any property tradeto	rred	Data powerst	
	Person Who Was Paid			rary property transfer		Date payment or transfer was made	Amount of paym
1	Number Street					*****	\$
•		And the second s			1		Ф.
ī	City	State ZIP Code	l	•			Ъ
	formed in the ordinar	ry course or your b	tcy, did you sell, trade, ousiness or financial aff ade as security (such as	airs? the granting of a se			
nclud Do no	le both outright transf t include gifts and tra	ansfers that you have	e already listed on this st				епу).
nclud Do no	le both outright transf it include gifts and tra o	ansfers that you have	e already listed on this st Description and value of transferred	property p es	cribe any property or ebts paid in exchang	r payments received	
nclud Do no Do No	le both outright transf it include gifts and tra o	Insiers that you have	e already listed on this st Description and value of	property p es	cribe any property or obts paid in exchang	r payments received	Date transfer
nclud Do no No Ye	le both outright transf it include gifts and tra o es. Fill in the details.	Insiers that you have	e already listed on this st Description and value of	property p es	cribe any property or obts paid in exchang	r payments received	Date transfer
nclud Do no No Ye	le both outright transf t include gifts and tra co es. Fill in the details.	Insiers that you have	e already listed on this st Description and value of	property p es	cribe any property or ebts paid in exchang	r payments received	Date transfer
nclud Do no No Ye	e both outright transf t include gifts and tra c es. Fill in the details. erson Who Received Transf umber Street	Insiers that you have	e already listed on this st Description and value of	property p es	cribe any property or ebts paid in exchang	r payments received	Date transfer
Position in the control of the contr	e both outright transf t include gifts and tra c es. Fill in the details. erson Who Received Transf umber Street	ler State ZIP Code	e already listed on this st Description and value of	property p es	cribe any property or ebts pair in exchang	r payments received	Date transfer
Pi	le both outright transf t include gifts and tra t include gifts and tra to tes. Fill in the details. erson Who Received Transl tumber Street erson's relationship to you	fer State AIP Code	e already listed on this st Description and value of	property p es	cribe any property of ebts paid in exchang	r payments received	Date transfer
Po	le both outright transfit include gifts and traces. Fill in the details. erson Who Received Transfumber Street sty serson's relationship to your serson's	fer State AIP Code	e already listed on this st Description and value of	property p es	cribe any property of ebts pair in exchang	r payments received	Date transfer
Pe	le both outright transfit include gifts and traces. Fill in the details. erson Who Received Transfumber Street erson's relationship to your serson Who Received Transfit in the details.	fer State AIP Code	e already listed on this st Description and value of	property p es	cribe any property of	r payments received	Date transfer

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 54 of 59

Debtor 1	Flower First Name	Lajuana Middle Name	Robinson Last Name	Case number (#	known)	
	a beneficially:	(These are often calle	kruptcy, did you transfer any d asset-protection devices.)	r property to a self-settled tr	ust or similar device of t	which you
			Description and value of t	he property transferred		Date transfer was made
N	lame of trust					
			According to the state of the s	the three the following the three th		
Part 8:			nts, Instruments, Safe Do			nes y en group plan plan (san a sanon una profinança que que gan gión gión demonen
Inclu broke	de checking, s erage houses,	pension tunas, coop	et, or other financial account eratives, associations, and o	s; certificates of deposit; sh ther financial institutions.	ares in banks, credit un	ions,
		,	Last 4 digits of account nu	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
-	lame of Financial I.	State ZIP Code	xxxx-/	Checking Savings Money market Brokerage Other		\$
_	ame of Financial Ir	stution		Checking Savings Money market Brokerage		\$
	ity	State ZIP Code		Other		
□ No	des, casii, or c	other valuables?	1 year before you filed for ba	Describe the		Do you still have it?
Na	me of Financial Ins	stitution	Na/ne	$+$ / \perp	aer.	□ No □ Yes
	mber Street		City State ZIP Code			
Cit	у	State ZIP Code /	· /		·····	

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 55 of 59

btor 1 F		.ajuana Middle Name L	Robinson ast Name	(Case number (# known)	
L∟I No			it or place other than your	home within 1 ye	ear before you filed for ba	ankruptcy?
Yes. F	Fill in the deta	ils.	Who else has or had acc	ess to it?	Describe the contents	Do you s have it?
Nami	e of Storage Facili	ity	Name			□ No □ Yes
Numi	ber Street		Number Street		 .	
,	***************************************		City State ZIP Code	WALL.		
City		State ZIP Code	-			
irt 9:	identify Pr	operty You Hold	or Control for Someon	e Else		
Do you h or hold ir No	nold or control n trust for son	I any property that neone.	someone else owns? Inclu	de any property	you borrowed from, are	storing for,
Yes. F	Fill in the deta	ils.				
			Where is the property?		Describe the property	Value
Owne	er's Name					\$
	er's Name per Street		Number Street			\$
			Number Street			\$
		State ZIP Code		tate ZIP Code		\$
Numb	per Street			tate ZIP Code		:
City 1102 the purpo	Give Detail	s About Environ , the following def	City s mental information initions apply:			· · · · · · · · · · · · · · · · · · ·
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the purportion mazardous netuding Site mean utilize it outstance ort all not las any go	Give Detail ose of Part 10 mental law mea s or toxic sub statutes or re as any location or used to own as material me e, hazardous i	s About Environ the the following defines any federal, states trances, wastes, or gulations controlling, facility, or properate, or utilized ans anything an ematerial, pollutant, s, and proceedings unit notified you the	mental information initions apply: ate, or local statute or regular material into the air, landing the cleanup of these surty as defined under any elect, including disposal site avironmental law defines a contaminant, or similar te	lation concerning, soil, surface wastences, wastenvironmental laws. s a hazardous warm.	ater, groundwater, or oth s, or material.	on, releases of er medium, operate, or ce, toxic
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the purpose in a sany go and a sany go	Give Detail ose of Part 10 mental law mea s or toxic sub statutes or re as any location or used to own is material me e, hazardous i tices, releases overnmental u	s About Environ the the following defines any federal, states trances, wastes, or gulations controlling, facility, or properate, or utilized ans anything an ematerial, pollutant, s, and proceedings unit notified you the	mental information initions apply: ate, or local statute or regular material into the air, landing the cleanup of these surty as defined under any elect, including disposal site avironmental law defines all contaminant, or similar teles that you know about, regulat you may be liable or pot	lation concerning, soil, surface was bstances, waste nvironmental laws. s a hazardous warm. ardless of when the entially liable under the soil of th	ater, groundwater, or oth s, or material.	on, releases of eer medium, operate, or ce, toxic
Numb City THE Purpo Environm hazardous including Site mean utilize it o Hazardous substance out all not las any go No Yes, Fi	Give Detail ose of Part 10 nental law mea s or toxic sub statutes or re as any location or used to own s material me e, hazardous i tices, releases overnmental t	s About Environ the the following defines any federal, states trances, wastes, or gulations controlling, facility, or properate, or utilized ans anything an ematerial, pollutant, s, and proceedings unit notified you the	mental information initions apply: ate, or local statute or regular material into the air, landing the cleanup of these surty as defined under any elect, including disposal site avironmental law defines all contaminant, or similar teles that you know about, regard you may be liable or pot	lation concerning, soil, surface was bstances, waste nvironmental laws. s a hazardous warm. ardless of when the entially liable under the soil of th	ater, groundwater, or oth s, or material.	on, releases of eer medium, operate, or ce, toxic

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 56 of 59

r 1 Flower	Lajuana	Robinson	Case number (#known)	
fifst Name	Middle Name	Last Name	(3.7,10.77)	
Have you notified a	nv governmental :	unit of any release of hazardous mate	of 10	
□ No	, governmentar t	and or any release of nazardous matel	nar?	
Yes. Fill in the	details.			
		Governmental unit	Environmental law, if you know it	Date of notic
			, , , , , , , , , , , , , , , , , , , ,	***************************************
Name of site		Governmental unit	-	
Number Street		Number Street		
		2,300		
		City State ZIP Code	-	
City	State ZIP Cod	de		
₃ve you been a pa	rty in any judicial c	or administrative proceeding under an	y environmental law? Include settlemen	ts and orders.
No Yes. Fill in the d	lotaile			÷
a res. Fill III IIIe d	etans.	•		_
		Court or agency	Nature of the case	Status of th case
Case title				п
		Court Name		Pending On appe
		Number Street		Conclud
Case number				Concide
Case number		City State ZIP Cod	de	
Give Det		Business or Connections to Any		
A member of A partner in a	etor or seir-employ a limited liability c i partnership	red in a trade, profession, or other act ompany (LLC) or limited liability partr	ave any of the following connections to a tivity, either full-time or part-time nership (LLP)	ny business?
		g executive of a corporation		
		oting or equity securities of a corpora	ition	
	bove applies. Go t	o Part 12. I fill in the details below for each busi		
	at apply above and	Describe the nature of the business		
Business Name			- The state of the	
Number Street			EIN:	
		Name of accountant or bookkeeper	Dates business existed	
			From To	
City	State ZIP Code			
		Describe the nature of the business	minprojer identification to	
Business Name			Do not include Social Sec	curity number or ITIN.
Number Street		CONTROL MARKET CONTROL AND CON	EIN:	
		Name of accountant or bookkeeper	Dates business existed	
		Administration of the second s		
			From To _	
City	State ZIP Code	*****	10_	***************

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 57 of 59

Debtor 1	Flower	Lajuana	Robinson	Case number (#known)
	First Name	Middle Name Last	Name	Odde Humber (Fritown)
1				
			Describe the nature of the business	Employer Identification number
A market	Business Name			Do not include Social Security number or ITIN.
Water Williams	Dusiness Name			· 5111
T PARTY TO THE PAR	Number Street			EIN:
	tramocr Brider		Name of accountant or bookkeeper	Dates business existed
		W		
				Erom T
Aleks Comment	City	State ZIP Code		From To
			-	99900
}				
28. With	nin 2 years befo	re you filed for bankrup	tcy, did you give a financial statement to	o anyone about your business? Include all financial
	ridions, credit	ors, or other parties.		
' L	res. Fill in the c	letails below.		
			Date issued	
	Name		MM / DD / YYYY	
	Number Street			
	City	State ZIP Code		
				Parameter
				Territory Angelogia
na n				**************************************
Part 12	Sign Belo	W		Transition to the second secon
i na ans	ve read the ans wer s a re true ar	wers on this <i>Statement</i> nd correct. Lunderstand	of Financial Affairs and any attachments	s, and I declare under penalty of perjury that the ng property, or obtaining money or property by fraud
				ng property, or obtaining money or property by fraud
18 L	0.5.0 99 152, 12	1, 1519, and 3571.		, , , , , , , , , , , , , , , , , , , ,
		/		
×	$\mathbf{Y} \mathbf{J} \mathbf{f}$	/ ~	x	
S	ignature of Debto	or 1		
	D • •	e e	Signature of Debtor 2	
E	ate 1-31-1	1	Date	
		 tional pages to Your Sta		nls Filing for Bankruptcy (Official Form 107)?
		manus pugges to 7007 Ott	Remem of Financial Affairs for individua	nis Filing for Bankruptcy (Official Form 107)?
 -	No			
u	Yes			
Did y	ou pay or agre	e to pay someone who i	s not an attorney to help you fill out ban	kruptcy forms?
L	lo			
☐ Y	es. Name of per	son		Attach the Bankruptcy Petition Preparer's Notice,
				Declaration, and Signature (Official Form 119).

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 58 of 59

Fill in this i	nformation	to identify your case:		
Debtor 1	Flower	Lajuana	Robinson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	g) First Name	Middle Name	Last Name	
United States	Bankruptcy C	ourt for the: Northern Distric	et of Illinois	
Case number (If known)				Check if this is an amended filing
				amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1. List Your Creditors Who Have Secured Claims

. For any creditors that you listed in Part 1 of Schedule D: information below.	Creditors Who Have Claims Secured by Property (Offic	ial Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name:	Surrender the property.	□ No
	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	□ res
	Retain the property and [explain]:	
Creditor's name:	☐ Surrender the property.	□ No
•	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	La Tes
	Retain the property and [explain]:	
Creditor's name:	☐ Surrender the property.	No
Description of	Retain the property and redeem it.	Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain];	
Creditor's name:	☐ Surrender the property.	□ No
Description of	Retain the property and redeem it.	Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	- 163
	Retain the property and [explain]:	

12/15

Case 18-25618 Doc 1 Filed 09/12/18 Entered 09/12/18 09:40:29 Desc Main Document Page 59 of 59

	ne an unexpired personal property lease if the trustee does not assume i pired personal property leases	Will the lease be assumed?
Lessor's name:		□ No
Description of leased property:		Yes
Lessor's name:	4 SP 2 SERVICE AND ARREST AND ARREST AND ARREST ARREST AND ARREST	No
Description of leased property:		☐ Yes
essor's name:		□ No
Description of leased property:		☐ Yes
.essor's name:		□ No
Description of leased roperty:		☐ Yes
essor's name:		. Do
escription of leased roperty:		Yes
essor's name:		No
escription of leased roperty:		Yes
essor's name:		□ No
escription of leased		Yes